



October 12, 2017

To: All Prestige Health Choice Providers
From: Dr. William Burnham, Regional Medical Director
Subject: New List of HCPCS Codes Requiring Prior Authorization

Summary: A comprehensive list of Healthcare Common Procedure Coding System (HCPCS) codes that require prior authorization has been developed and is available at the Prestige Health Choice website. The new HCPCS codes list replaces the previous prior authorization requirement for infusion or injectable medications.

Effective December 8, 2017, a list of Healthcare Common Procedure Coding System (HCPCS) codes for medications requiring prior authorization has been added to the provider prior authorization page of the Prestige website, www.prestigehealthchoice.com. The new HCPCS codes list replaces the previous authorization requirement for infusion or injectable medications with charged amounts of \$250 or greater per line item when administered in an outpatient setting.

The process to submit medication requests containing an HCPCS code that requires prior authorization is as follows:

1. Submit a medication prior authorization request to the PerformRx Prior Authorization team by fax at **1-855-829-2871**. **For any questions, call PerformRx at 1-855-371-3963.**
2. The HCPCS code that corresponds to the medication request should be included in the request. If the HCPCS code is a miscellaneous code, the National Drug Code (NDC) number must also be included on the request.
3. PerformRx will then review the request and make a determination within seven calendar days for standard requests and two business days for urgent requests. An approval or denial will be based on prior authorization criteria developed in accordance with current clinical practice guidelines.
4. PerformRx will communicate the final determination to the provider.
 - a. If the prior authorization request is approved, a fax will be sent to your office alerting you of the approval.
 - b. If the prior authorization request is denied, a fax will be sent to your office alerting you of the denial. Also, a letter of denial will be mailed to your office. An additional copy will be mailed to the member.

The process to submit prior authorization requests to Prestige Utilization Management for any other service has not changed. You can continue to submit prior authorization requests:

1. Online via the Availity website at **www.availity.com**.
2. By fax using the fax number at the top of the appropriate prior authorization request form. The latest forms are available at **www.prestigehealthchoice.com**.
3. Expedited requests may be submitted by phone at **1-855-371-8074**.

You will be advised if a service no longer requires prior authorization.